



IAP13 Rec'd PCT/PTO 20 NOV 2006

PCT\$

FEE TRANSMITTAL For FY 2005	Complete if Known			
	Application Number	10/538,487		
	Filing Date	June 8, 2005		
	First Named Inventor	Poh et al.		
	Examiner Name	Tranh Tam T. Le		
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2839	
TOTAL AMOUNT OF PAYMENT		\$ 1,070.00	Attorney Docket No.	A1-231 US

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>50-1873</u> Deposit Account Name: <u>Molex Incorporated</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any addtl. fee(s) or underpayments under 37 CFR 1.16 and 1.17 and credit any overpayments.	

FEE CALCULATION					
1. Basic Filing, Search and Examination Fees					
	Filing Fees	Search Fees	Examination Fees		<u>Fees Paid (\$)</u>
Utility	\$300	\$500	\$200		\$
Design	\$200	\$100	\$130		\$
Plant	\$200	\$300	\$160		\$
Reissue	\$300	\$500	\$600		\$
Provisional	\$200	\$0	\$0		\$
2. Excess Claim Fees					
Each claim over 20 (including Reissues)					
<u>Total Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>	
22	-20 or HP=	2	x	\$50	= \$50.00
Each independent claim over 3 (including Reissues)					
<u>Indep. Claims</u>		<u>Extra Claims</u>		<u>Fee (\$)</u>	
3	-3 of HP=	0	x	\$200	= \$0.00
Multiple dependent claims				\$360	\$
3. Application Size Fee (over 100 sheets)					
<u>Total sheets</u>	<u>Extra sheets</u>	<u>Number of each addtl 50 (round up to whole #)</u>		<u>Fee (\$)</u>	
-100 =	/50 =		x	\$250	= \$
4. Petition for Extension of Time Fees					
Three months (37 CFR 1.17 (a)(3))					\$1,020.00
5. Other fee(s)					
11/27/2006 MKAYPAGH 00000023 501873 10538487					\$
01 FC:1615 50.00 DA					\$
TOTAL FEES					\$1,070.00

Name (Print/Type)	Robert J. Zeitler	Registration No. 37,973	Telephone (630) 527-4884
Signature	<i>Robert J. Zeitler</i>		Date 11/15/06

11/27/2006 MKAYPAGH 00000023 501873 10538487

02 FC:1253 1020.00 DA